

# TOXIC CATASTROPHE PREVENTION “TCPA” N.J.A.C. 7:31 COVERING THE ELEMENTS OF SUBCHAPTER 5 EMERGENCY RESPONSE CHECKLIST

**Source owner or operator**  
**Name:** \_\_\_\_\_

**TCPA ID:** \_\_\_\_\_

<b>COVERED PROCESS(s):</b> _____  <b>AUDITORS:</b> _____  <b>DATE COMPLETED:</b> _____	<b>ARE THE PROGRAM DESCRIPTION S WRITTEN AND AVAILABLE?</b>	<b>ARE THE SUPPORTING DOCUMENTS AVAILABLE AND REFLECT THE CURRENT OPERATIONS AND EQUIPMENT?</b>	<b>ARE WRITTEN PROCEDURES BEING FOLLOWED?</b>  <b>ADDED COMMENTS?</b>				
	Yes	No	Yes	No	Yes	No	Comment
<b>40 CFR 68 SUBPART E – EMERGENCY RESPONSE</b>							
<b>40 CFR 68.90 – APPLICABILITY</b> (a) Does the owner or operator of a stationary source with program 2 or 3 processes comply with 40CFR68.95? ( See exceptions in 40 CFR 68.90(b) for Program 2 )							
(b) If the owner or operator of a <b>PROGRAM 2</b> covered process whose employees will not respond to an accidental release, and does not comply with 40 CFR 68.95, have all the following provisions been met? (b)(1) Is the covered stationary source included in the community emergency response plan developed under 42 U.S.C. 11003?							
(b)(2) If the stationary source has only flammable substances above the threshold quantity, has the owner or operator coordinated response actions with the local fire department?							
(b)(3) Are there appropriate mechanisms in place to notify emergency responders when there is a need for a response?							
Does the owner or operator have documentation From the local fire department or other outside Responder agencies, that they will be responsible For responding to accidental releases at the stationary source?							
<b>40 CFR 68.95(a)</b> (1) Does the owner or operator have an emergency response program that includes the following: i Procedures for informing the public and local emergency response agencies about accidental releases?							
ii Documentation of proper first aid and emergency medical treatment necessary to treat accidental releases?							
iii Procedures and measures for emergency							

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	Yes	No	Yes	No	Yes	No	Comment
response after an accidental release of a regulated substance?							
(2) Procedures for use of emergency response equipment and for its inspection, testing, and maintenance?							
(3) Training for all employees in relevant procedures?							
(4) Procedures to review and update the emergency response plan to reflect changes at the stationary source and ensure that employees are informed of the changes?							
40 CFR 68.95(b) Does the written emergency response plan follow the approach of the National Response Team Integrated Contingency Plan Guidance?							
40 CFR 68.95(c) Has the emergency response plan been coordinated with the community response plan developed under 42 U.S.C. 11003?							
N.J.A.C.7:31-5.2(b) (b)(1) Does the emergency response program include a schedule for initial and annual emergency response training for all employees in relevant procedures?							
(b)(2) Does the emergency response program include a schedule to perform at least one ER exercise per calendar year?							
i For program 2, where owner or operators employees will not respond to an EHS incident, was at least one outside responder agency invited to participate in the exercise?							
ii For all other owners or operators, was one full scale exercise conducted in which the ER team and ER containment, mitigation and monitoring equipment deployed at a strength appropriate to demonstrate adequacy and implementation of the plan?							

# TOXIC CATASTROPHE PREVENTION "TCPA"

## N.J.A.C. 7:31 COVERING THE ELEMENTS OF

### SUBCHAPTER 5 EMERGENCY RESPONSE

### CHECKLIST

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	Yes	No	Yes	No	Yes	No	Comment
(b)(3) Was a written assessment of the ER plan and of the adequacy or need for ER equipment prepared after each ER implementation or exercise?							
(b)(4) Is there a description of the emergency notification system which includes the following: i Immediate notification to the Department's emergency communications center at (609) 292-7172 by the emergency coordinator or designee of an EHS accident or imminent EHS accident at the stationary source, with the following information: (1) Company name and address of the EHS accident. (2) Name, position and telephone number of the caller. (3) Time and projected duration of the accident. (4) EHS chemical name. (5) Actual EHS quantity or estimate and potential off site impact. (6) Weather conditions, wind direction and speed.							
ii Provision of notification updates to the Department emergency communications center, if requested, that includes, in addition to the original information provided, the location of the point of EHS release, a description of the source, cause and type of EHS incident, quantity and concentration of the EHS released, and whether the release is of a continuing nature?							

NOTE: Any "No" answer should be accompanied by a description of the findings, corrective actions, and implementation schedule on additional attached sheets.

S: ...shldocs/RMP\_chk\_lists/EMERGcheck.doc